

Screening and Assessment in Family Dependency Treatment Courts



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Learning Objectives

- Learn basic principles regarding screening & assessment
- Learn the differences between classification, screening, & assessment
- Learn how to best use the results of screening & assessment
- Learn the qualifications and/or training required to use certain measures

Basic Principles

- Respect the privacy & confidentiality of those with whom you are working
- Federal laws (e.g., CFR 42, HIPPA) govern the use of substance abuse & health information

Basic Principles

- Respect and take into account the cultural, racial, ethnic and gender differences of your clients & their families
- Use results responsibly and ethically – don't go beyond the intended use of the measures

The RNR Model

It is important to assess:

- Risk
- Needs
- Responsivity

These form the RNR Model

The RNR Model

Risk

- The Risk Principle – Match the level of a person's risk to the level of intervention or treatment. The higher the risk, the more intensive and longer the treatment required.

The RNR Model

Needs

- Needs are those dynamic issues that the clients present with that are very often the focus of the intervention. Examples include mental health issues and substance abuse.

The RNR Model

Responsivity

- Responsivity refers to the degree to which the client can participate in and benefit from (that is, respond to) treatment and intervention efforts.

The RNR Model

When you measure these three factors using valid & reliable tools, you will have the baseline knowledge about your clients necessary to apply your intervention or treatment.

Screening and Assessment

Screening

- Screening – a preliminary gathering and sorting of information, the results of which are then used to determine if a more comprehensive clinical assessment is needed.
- Screenings are necessary because often budgets won't allow for everyone to be clinically assessed.

Screening

Screening is also a way of addressing whether an individual is appropriate for the program, based on your eligibility criteria. Does the potential participant meet necessary criteria for inclusion? Do they meet any of the exclusionary criteria (e.g., history of violence)?

Screening

The screening process should be used to address the appropriateness of the referral (*risk* and *needs*) and the *responsivity* of the person being screened. Is this the type of person who both needs and can benefit from the program?

Screening

- Does this person have needs that can be addressed by our program?
- Is there an appropriate match between the risk and level of programming?
- Are there any barriers to this person being able to benefit from participating in the program?

Assessment

Assessment - the collection of detailed, comprehensive information with the purpose of obtaining an in-depth understanding of the person's issues and what will be required to adequately address the issues.

Assessment

- Assessment is to be performed by trained, typically licensed and/or credentialed treatment professionals.
- Assessment results also lead directly to the development of an appropriate treatment plan.

Assessment

Assessment is often the first step in the treatment process. The potential participant can be engaged at this point, as they are confronted with their issues and their need for treatment. They can then decide whether to engage in the treatment process.

Areas to Assess

- Comprehensive History
 - Developmental/Childhood
 - Educational/Vocational
 - Health/Mental Health
 - Criminal/Legal
 - Family/Family of Origin Relationships
 - Abuse/Neglect/Trauma
 - Substance Abuse and other coping strategies
 - Treatment

Areas to Assess

- Current status and context:
 - Social, family structure and supports
 - Educational/vocational status
 - Residential status
 - Sources of financial and other support
 - Criminal justice involvement/status
 - Acute and chronic medical/mental health status and needs

Areas to Assess

- General level of mental and psychiatric functioning
- Presence of psychopathology
 - Assess for psychopathology in general
 - Assess for specific types of issues, such as depression and anxiety

Areas to Assess

Trauma – don't overlook the importance of assessing trauma, the presence of which is often found in serious substance abusers. Assess childhood trauma (adverse childhood events, or ACE) as well as adult trauma. Trauma is not limited to female participants – we have found many of our male participants to have significant histories of trauma.

Areas to Assess

- Substance Abuse and/or Dependence
 - This is essential, and there are many different measures you can use to assess historical and current substance abuse. You want comprehensive and specific details about use – frequency, amounts, drugs of choice, routes of administration, means of acquisition.

Assessing Juveniles

Many of the same principles apply to assessing juveniles as to adults, but there are certain limitations to keep in mind, such as: reading level, cognitive maturity, issues of consent, and differentiating normal adolescent behavior from serious criminal and/or substance abuse patterns.

Assessing Family Issues

- Regardless of the characteristics of the person presenting for treatment, there are almost certainly family issues that are a part of the overall clinical picture.
- Be sure to assess for specific family issues in family and juvenile drug court programs.

Specific Measures

Current Mental Status

Depending on the source and nature of your referrals, you may be screening people who are actively abusing and in acute distress. Always assess for suicidal ideation and risk for self harm, as well as for violence towards others. This is best done during the initial screening.

Current Mental Status

It is also important to assess for current level of functioning, to make sure potential participants are in a position to meaningfully participate in assessment and treatment. You can perform a mental status exam (MSE) to screen for cognitive deficits and other potential impairments and issues.

Substance Abuse Measures

Addiction Severity Index (ASI) – Many variations of this measure exist, which is in the public domain (it is free!). Comprehensive assessment, but somewhat clunky and time consuming, as it is administered via structured interview. Computer administration is available, as are many variations for specific populations.

Substance Abuse Measures

- Substance Abuse Subtle Screening Inventory (SASSI) – A very good screening measure – not comprehensive.
- Texas Christian University Drug Screen II (TCUDS II) – A good, quick screening measure – not comprehensive.
- The CAGE Questionnaire – four questions to assess for alcohol/drug abuse.

The CAGE Questionnaire

- Have you ever felt the need to Cut down on your drinking/drug use?
- Do you feel Annoyed by people complaining about your drinking/drug use?
- Do you ever feel Guilty about your drinking/drug use?
- (Alcohol) Do you ever drink an Eye-opener in the morning to relieve the shakes OR
- (Drug abuse) Do you ever use drugs the first thing in the morning to take the Edge off?

Substance Abuse Measures

- Michigan Alcohol Screening Test (MAST) – more comprehensive than the CAGE, comprising 22 (MAST-R) or 25 questions (original MAST, circa 1971).
- Drug Abuse Screening Test (DAST) – a 28-item analogue to the MAST, developed in 1982 and still widely used.
- The AUDIT, the T-ACE, and the TWEAK are other popular alcohol screens.

Substance Abuse Measures for Adolescents

- Adolescent Obsessive-Compulsive Drinking Scale (A-OCDS)
- Adolescent Alcohol Involvement Scale (AAIS)
- Comprehensive Adolescent Severity Inventory (CASI)
- Customary Drinking and Drug Use Record (CDDR)
- Personal Experience Screening Questionnaire (PESQ)
- Problem Recognition Questionnaire (PRQ)
- SASSI – Adolescent Version
- Teen Addiction Severity Index (T-ASI)

Assessing Psychopathology

- General Psychopathology
 - Symptom Checklist-90-R (SCL-90-R)
 - Minnesota Multiphasic Personality Inventory – 2 (MMPI-2, MMPI-A)
 - Millon Personality Scales (MCMII-III, MACI)
- Specific Psychopathology
 - Beck Depression Inventory – II (BDI-II)
 - Beck Anxiety Inventory (BAI)

Assessing Trauma

- John Briere’s measures, such as the Trauma Symptom Inventory for adults and the Trauma Symptom Checklist for Children are worth considering.
- Thomas Achenbach’s Child Behavior Checklist and Teacher Report Form assess child trauma and problematic behavior from multiple perspectives.

Assessing Parenting

- Parenting Attitudes and Practices – the Adult-Adolescent Parenting Inventory (AAPI-2) assesses five domains of parenting related to abusive parenting attitudes and styles.
- Parenting Stress Index, 3rd Edition (PSI) assesses parenting stress in a variety of domains.

Child Developmental Screens

- The Ages and Stages Questionnaire (ASQ) is used to assess developmental progress of young children (age 3 months to 5 years) in five key domains.
- Work with local public and private providers and health departments to get health (e.g., dental, hearing, vision) screenings for children of participants.

Readiness for Treatment

- The Transtheoretical Model (TTM) – delineates the stages of change:
 - Pre-contemplation
 - Contemplation
 - Preparation
 - Action
 - Maintenance

Readiness for Treatment

- Assessing stage of change – the University of Rhode Island Change Assessment (URICA)
- Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES)

Readiness for Treatment

Familiarize yourself with the technique of Motivational Interviewing (MI) by Miller and Rollnick (2002). This can be very helpful during the screening and assessment process to help people move along the change process.

Resources

SAMHSA's Center for Substance Abuse Treatment (CSAT) Treatment Improvement Protocol (TIP) Series – e.g., TIP 7, *Screening and Assessment for Alcohol and Other Drug Abuse Among Adults in the Criminal Justice System*. This and all the other TIP volumes are excellent and free of charge.



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A screenshot of the Applied Research Services, Inc. website. The header includes the company name 'Applied Research Services, Inc.' and the tagline 'Turning Data Into Decisions'. A navigation menu on the left lists 'about us', 'contact us', 'staff', and 'products'. The main content area features a large blue wireframe graphic and four small thumbnail images: a city skyline at night, a person's face, a person in a lab coat, and a computer monitor displaying data. The ARS logo is visible in the top right corner of the screenshot.

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